

PART B - FEE(S) TRANSMITTAL

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36122

7590

12/03/2004

DUFT SETTER OLLILA & BORNSSEN LLC
2060 BROADWAY
SUITE 300
BOULDER, CO 80302

01/14/2005 CNGUYEN1 00000080 09619736

01 FC:1501 1400.00 OP
 02 FC:8001 30.00 OP

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Laura S. Mellblom	(Depositor's name)
<i>Laura S. Mellblom</i>	(Signature)
1-10-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/619,736	07/19/2000	Reza Mirkhani	99RSS476NAD	2617

TITLE OF INVENTION: LINK LAYER CONTROLLER THAT PROVIDES A MEMORY STATUS SIGNAL TO A NETWORK LAYER SYSTEM IN A COMMUNICATION DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370 \$1400	03/03/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
PARK, ILWOO		2182	710-056000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Keith Kind

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Mindspeed Technologies, Inc. Newport Beach, CA 92660

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies ten (10)

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- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502622 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Michael J. Setter

Date

1-10-05

Typed or printed name

Michael J. Setter

Registration No.

37,936

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